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Honourable Minister of Health and Childcare, Douglas Mombeshora sharing his remarks during the Media Breakfast meeting

ZNNP+ and the Ministry of Health and Childcare call for action against HIV related stigma.

The Zimbabwe National Network of People Living with HIV (ZNNP+) has called for united efforts to eliminate HIV-related stigma and discrimination. At a recent media breakfast meeting, Program Officer Tonderai Mwareka shared alarming findings from a stigma index study, revealing that 69.7% of people living with HIV experienced stigma in 2022, up from 65.5% in 2014. He stressed the urgency of addressing this issue, stating, "We need to act urgently to address this issue because the global target is less than 10%," and underscored the critical role of community support and education in combating stigma.

Minister of Health and Child Care, Honourable Dr Douglas Mombeshora echoed these sentiments, highlighting the severe impact of stigma on Zimbabwe's HIV response. He remarked, "Stigma and discrimination remain among the most damaging

barriers to Zimbabwe's national HIV response. For people living with HIV, the impact goes beyond emotional distress — it is structural and systemic." Dr Mombeshora pointed out that stigma not only isolates individuals but also erodes their self-worth, discouraging vital actions such as HIV testing, disclosure, and adherence to treatment.

Despite the persistent stigma, Zimbabwe has made significant progress in its HIV response, with approximately 1.3 million people living with HIV and over 96% accessing life-saving antiretroviral therapy. However, internalized stigma continues to harm mental health, leading to delays in seeking care and complicating public health initiatives aimed at controlling the virus. The need for comprehensive strategies to address stigma remains critical in ensuring better health outcomes for those affected.

In this issue...



Zimbabwe Launches Lenacapavir, Advancing HIV Prevention Efforts

In this issue...



ZNNP+ holds Provincial Candlelight Memorials

Leadership Lens: Mid Year Reflections

Dear Friends and Colleagues,

As we cross the mid-point of 2025, it's time to reflect on the progress and challenges in Zimbabwe's HIV response. Our journey this year has been marked by resilience, innovation, and a renewed commitment but also by worrying setbacks that deserve urgent attention.

Zimbabwe continues to carry a heavy burden, with roughly 1.3 million people living with HIV and an adult prevalence of about 11% but new infections remain unacceptably high estimated at 17,000 per year. We proudly remain among the few African nations to have reached the UNAIDS 95, 95, 95 targets with 98% knowing their status, 97% of these are on ART, and 96% on ART have viral suppression. However, the first half of 2025 saw 5,932 AIDS-related deaths, an increase of 220 compared to the same period in 2024.

While the Ministry assures us drug supplies will last to September this spike signals a costly worry. External aid, particularly from PEPFAR and USAID, remains a backbone of our HIV programme; about 31% of ARVs are procured with U.S. support. But global budget shifts like recent U.S. freezes have destabilized key services, from HIV testing to PrEP and HRH salaries.

As ZNNP+ we are advocating for strengthened domestic financing, tapping into the AIDS Levy, new levies, and private partnerships. The message is clear: philanthropy is welcome, but Zimbabwe must build a self-reliant and resilient HIV response.

Despite our clinical successes, stigma, especially in employment, remains rampant. A case earlier this year involved a woman in Bulawayo who was fired simply for missing work while attending routine HIV care. Her dismissal reminds us of durable social barriers, 69,7 % of people living with HIV report being stigmatized.

Discrimination of this nature not only violates human rights but discourages people from seeking essential services undermining everything we have built. We must ensure national laws and workplace policies shed stigma, rooted firmly in evidence, dignity, and fairness.

The first half of 2025 reflects Zimbabwe's incredible tenacity in the face of adversity. We have



ZNNP+ Executive Director Mr Tatenda Makoni

achieved remarkable milestones: keeping diagnosis rates high, rolling out game changing treatments, and driving progress toward UNAIDS goals. Yet, surging AIDS-related deaths, funding shocks, and ongoing stigma are stark reminders that our work is far from over.

As we move forward, ZNNP+ continues to champion the rights, dignity, and wellbeing of people living with HIV across Zimbabwe. We are actively engaging policy makers, civil society, and development partners to ensure that the HIV response remains people-centred, adequately funded, and grounded in equity.

From advocating for widespread access to long-acting therapies like cabotegravir and lenacapavir, to challenging harmful stigma in workplaces and communities, our mission remains clear: no one should be left behind.

We will continue to elevate community voices, monitor service delivery on the ground, and push for stronger protection against discrimination. The path ahead demands collaboration, courage, and accountability and ZNNP+ remains firmly committed to walking it with you.

Insights from the GNP+ PLHIV Leadership summit 2025.



ZNNP+ Executive Director Mr Tatenda Makoni with Tariq El Alaoui, Director of Programs at Mena Community

In a pivotal meeting in Nairobi, Mr. Makoni, the Executive Director of ZNNP+, shared his insights during the PLHIV Leadership Platform. His interview captured the urgency and complexity of the challenges faced by people living with HIV in Zimbabwe, particularly regarding the heavy reliance on donor funding.

"Currently, we are experiencing significant anxiety," Mr. Makoni stated. "PEPFAR has supported us for years, yet much of our funding is donor-dependent. In Zimbabwe, while we've achieved the UNAIDS 95-95-95 targets, we remain heavily reliant on these external sources."

He highlighted the disruptions in healthcare services caused by the reliance on donor-funded staff in hospitals. "During the recent stop-work orders, we witnessed an alarming increase in stigma. Many people living with HIV are in distress, which has a domino effect on health outcomes. This is a crisis that calls for immediate contingency plans."

Mr. Makoni emphasized that having a plan is not enough; securing financing is critical. "The government and private sector must respond quickly and work toward a consensus. Health delivery is a fundamental right enshrined in our 2013 Constitution, and we all have a role to play."

He urged the community to support initiatives around ART adherence, task shifting, and treatment literacy training. "We know our communities well and can implement differentiated service delivery models, such as out-of-facility ART distribution, to ease the burden on health workers."

During the discussion, he stressed the importance of using crises as lessons for improvement. "We need strict documentation regarding resource allocation and improved management of health stocks. By utilizing electronic health records, we can prevent duplication and ensure ART does not expire."

Looking forward, Mr. Makoni called for stronger

community engagement. "In Zimbabwe, we've initiated a social contracting model to enhance community involvement in adherence and outreach efforts. Everyone has a role in ensuring a multisectoral response to HIV."

He also highlighted the significance of public finance tracking. "We must monitor resources effectively to understand who gets what, when, and how," he noted. Innovations like telehealth projects and the Kutabila Platform were discussed as vital tools to facilitate access to services without the burden of transport costs.

As Mr. Makoni concluded his interview, he left the audience with a sense of hope and determination. His insights underscored the importance of collaboration and community-driven solutions in the



Leadership seminar attendees in Nairobi, Kenya.

fight against HIV, inspiring those present to work together for a healthier future.

Lenacapavir Launch Marks Major Milestone in HIV Prevention for Zimbabwe

The introduction of Lenacapavir, a twice-yearly injectable for HIV prevention marks a major breakthrough for individuals in Zimbabwe, particularly those in serodiscordant relationships. With the country having already achieved the UNAIDS 95-95-95 targets, Lenacapavir offers an additional, vital layer of protection for HIV-negative partners. Its long-acting, discreet nature reduces reliance on daily oral PrEP and helps minimize stigma associated with HIV prevention.

For Zimbabweans living with HIV, Lenacapavir represents more than just a biomedical innovation. Adherence to oral PrEP has long been a challenge, with many individuals reporting that they only take it during perceived periods of vulnerability. In contrast, Lenacapavir's biannual injection schedule minimizes the burden of frequent clinic visits and is associated with fewer side effects, making it a more sustainable option for many.

By improving adherence, reducing stigma, and streamlining care, Lenacapavir holds the potential to significantly enhance health outcomes. Realizing this potential will require coordinated efforts from healthcare providers, community advocates, and policymakers. Together, they can help usher in a new era of HIV prevention and treatment, one that promises a healthier, more equitable future for all Zimbabweans.



Lenacapavir in Zimbabwe will be prioritized for high-risk groups such as adolescent girls, young women, sex workers, men who have sex with men, and people in serodiscordant relationships. However, with actual costs still unclear despite generic licensing, sustainable rollout will require transparent pricing, clear targeting, and integration into existing HIV programs to ensure it strengthens rather than burdens the health system.

Impact of the USG Stop-Work Order and the ZNNP+ Response

The Zimbabwe National Network of People Living with HIV (ZNNP+) has played a pivotal role in responding to the disruption caused by the United States Government's (USG) sudden stop-work order on all USAID-funded activities in Zimbabwe, issued in January 2025. The directive halted vital programs and deeply affected NGOs, especially those delivering health services.

ZNNP+, a key player in Zimbabwe's HIV response, was among the most affected. The organization was forced to suspend outreach programs, pause support group meetings, lay off provincial staff, and interrupt ROC follow-up systems, jeopardizing treatment adherence for many people living with HIV (PLHIV).

In the face of these disruptions, ZNNP+ swiftly introduced a Situational Report (SITREP) to monitor the evolving crisis from the viewpoint of Recipients of Care (RoC). The report provided real-time updates on challenges such as ART access issues, medication stock-outs, and community-reported service gaps. Initially shared daily, the SITREP has transitioned to a bi-weekly publication and continues to serve as an important advocacy and accountability tool for engaging donors, partners, and policymakers.



"The SITREP became our way of ensuring that the voices of people living with HIV were heard," said Faith Muperi, ZNNP+ Advocacy and Communications Officer.

ZNNP+ has been commended for keeping PLHIV at the center of the conversation, even as services scaled down. The organization is now calling for greater emergency preparedness, diversified funding, and community-led resilience strategies to safeguard health services from future shocks.

Voices from the community

"I used to buy medicine from a pharmacy, the TASQC program eased my burdern and the thought of saving money for ART stressed me" said

Nolwazi Mpofo, Bulawayo Province

The USAID money has changed a lot in our communities, we now give birth to HIV negative babies, we now have PreP and the news that it could all go away left us shocked and worried of our health

Senzeni Zangariko, Matabeleland South

We are at risk. People may start dying again like what happened around 2000 and 2002 before ARVs were made available to everyone with HIV. I'm afraid," said Chabikwa, who lives in Harare.

Siphiwe Chapikwa, Harare Province

"I can't imagine going without my treatment, what if this affects our health? We've fought so hard to get where we are."

Jane Mapfumo, Manicaland Province



People started sending messages on social media, saying ART supply was going to be cut in Africa. I was shaken, I didn't know what to do. I then called the ZNNP+ via the Kutabila Platform and they reassured me not to worry but be on the lookout for any updates"

Simelelikufa Chitakunye, Manicaland Province

ZNNP+ supports the review of the Community HIV treatment literacy manual.



In the month of May, the Zimbabwe National Network of People Living with HIV gathered in Gweru for an inspiring week focused on health empowerment. They launched the Community HIV Treatment Literacy Manual, a vital resource aimed at educating individuals about their treatment options.

The initiative highlights the importance of informed choices, enabling people to take control of their health. By understanding available treatments, individuals can enhance their well-being and quality of life. The manual also serves as a tool to reduce stigma surrounding HIV/AIDS, promoting open discussions that foster understanding and acceptance.

Moreover, the rollout plan emphasizes building support networks, connecting those facing similar challenges. As stakeholders collaborated on this project, the atmosphere buzzed with hope and determination, marking a significant step toward improved health outcomes in the community. The message was clear: knowledge is power, and together, we can combat HIV/AIDS effectively.



A Journey of Resilience: The Inspiring Story of Gogo Muhoni, Gogo Mazhiri, and Gogo Zimba through Inquiry Based Stress Reduction training (IBSR)



Gogo Zimba



Gogo Mazhiri



Gogo Muhoni

In the serene landscapes of Alaska, Makonde district, three extraordinary women—Gogo Muhoni (72 years), Gogo Mazhiri (69 years), and Gogo Zimba (73 years)—transformed their lives in ways they never imagined. Their journey began in 2006, a year that marked a profound shift when they each discovered they were HIV positive, following the tragic loss of their husbands due to AIDS.

The initial shock was overwhelming. Gogo Mazhiri, engulfed in grief, faced a dark reality. Convinced her life was nearing its end, she began distributing her possessions to family members, expressing a deep desire to fade away.

"I wanted to die, I started sharing all that I had with my family," she admitted, overwhelmed by despair. Gogo Zimba, too, found herself battling an unexplained illness, unaware of her status until her family urged her to get tested.

Gogo Muhoni's journey was equally bewildering; she believed she had been bewitched. Her health took a further hit when she tested positive for Tuberculosis, deepening her fears. The stigma associated with their conditions added to their struggles, making acceptance seem nearly impossible, "I could not think of anything except the fact that I was bewitched and I actually had someone I suspected to have been bewitching me," said Gogo Muhoni.

Despite the unwavering support from their families, self-blame lingered in their hearts. Each woman grappled with self-stigma, wrestling with feelings of guilt and shame. They often questioned how

they had allowed themselves to become infected, wondering if they could have done something differently.

Relief arrived through the intervention of Josphat, a local Community Health Agent. Recognizing their struggle with self-stigma, he referred them to an Inquiry-Based Stress Reduction (IBSR) workshop organized by the Zimbabwe National Network of People Living with HIV in partnership with Connect - Zimbabwe Institute of Systemic Therapy under the ZimPAAC project. The IBSR aimed at helping individuals living with HIV identify and manage stressful thoughts in their daily lives and deal with self-stigma.

The IBSR training proved transformative. Through guided discussions and exercises, Gogo Muhoni, Gogo Mazhiri, and Gogo Zimba began to unpack their emotions. They learned to confront and challenge their self-blame, gaining tools to cope with their feelings of guilt. As they shared their experiences with others in the workshop, they found solace in the community, discovering they were not alone in their struggles.



The Impact of Internal Stigma

During a recent training session organized by the Zimbabwe National Network of People Living with HIV (ZNNP+), participants gathered to share their personal experiences. Thandi, one attendee, opened up about her fears regarding her five-year-old niece, Lila, who is HIV positive. Her emotional account reflected the pervasive anxiety surrounding societal judgment and the stigma often faced by those living with HIV.

Thandi recounted a painful incident at the market when a woman pointed at Lila, suggesting she should be tested after a minor accident. This moment heightened Thandi's fears about how the community perceives Lila, amplifying her worries about rejection and acceptance. The session highlighted the internal struggles many attendees experience, revealing that self-stigma can intensify feelings of isolation.

The facilitators introduced a self-inquiry method to help participants challenge their negative thoughts. With guidance, Thandi began to explore her beliefs about the community's potential reactions to Lila's status. This process prompted her to realize that her fears were grounded in assumptions rather than reality, marking a turning point in her perspective.

Empowered by this new-found understanding, Thandi decided to approach Lila's pre-school teacher to explain her niece's situation. To her surprise, the teacher responded with empathy and support, which motivated Thandi to advocate for greater awareness about HIV in her community. She organized workshops at the preschool to educate parents and staff about living with HIV and the importance of providing support.



Thandi with IBSR Facilitator



Training Participants in Padre Pio Clinic, Norton Mash west

Her proactive approach not only benefited Lila but also contributed to fostering a more accepting environment for others living with HIV. Thandi's story serves as a beacon of hope, illustrating that confronting personal struggles can lead to greater community understanding and support. There is need to work with ministry of primary education in combating stigma among learners with underlying health conditions

What if my own internal stigma is keeping me from living my best life?



Miriam Chisadza a lady battling internal stigma

In a recent IBSR training session organized by the Zimbabwe National Network of People Living with HIV (ZNNP+) and Connect at Padre Pio Clinic, Miriam Chisadza shared her struggles with internal stigma related to her HIV status. As she spoke, her experiences resonated deeply with the participants, who felt the weight of her isolation and self-doubt.

Miriam revealed that for 17 years, following her husband's death, she had remained single, fearing rejection and judgment in potential relationships due to her HIV status.

The facilitators encouraged participants to engage in self-inquiry to challenge their negative thoughts. A pivotal moment occurred when Tatenda, a facilitator, posed a question about whether participants were stigmatizing their community through their internal fears.

This inquiry struck Miriam, prompting her to reflect on how her hesitation to embrace her identity and disclose her status might contribute to the stigma. With support from the group, she began to consider the possibility of being vulnerable and sharing her feelings more openly.

As Miriam explored her internal struggles further, she recognized that her fear of disclosing her HIV status had kept her isolated and hindered her from forming meaningful connections. She realized that by concealing this aspect of her identity, she was unintentionally perpetuating the very stigma she sought to dismantle. This insight marked a significant turning point in her journey toward self-acceptance and healing.



Tatenda raising what if questions on HIV stigma

Miriam's journey sparked a movement within the group, fostering a culture of acceptance as participants began to share their own fears and experiences. This collective sharing created a safe space where vulnerability was met with empathy. As Miriam and her community continue to cultivate this culture, they are likely to see increased engagement, encouraging more individuals living with HIV to share their stories and participate in support networks, ultimately raising awareness and reducing misconceptions in the broader community.

Pictures from Provincial Candlelight and WAD Commemorations



Harare , June 2025



Mashonaland Central, April, 2025



Harare , June 2025



Bulawayo, March, 2025



Frequently Asked Questions (FAQ)

by People Living with HIV (PLHIV) on the
Impact of U.S. Executive Orders on HIV Services in Zimbabwe



What are U.S. executive orders, and why do they matter for HIV services in Zimbabwe?

U.S. executive orders are directives issued by the President of the United States that can affect international policies, including funding for global health programs. On the 20th of January 2025, an executive order was made that has impacted on funding for some HIV services in Zimbabwe.



How do these executive orders affect my access to ARVs and other Health Services?

U.S. executive orders are directives issued by the President of the United States that can affect international policies, including funding for global health programs. On the 20th of January 2025, an executive order was made that has impacted on funding for some HIV services in Zimbabwe.



Will there be disruptions in HIV treatment services?

While some organizations may experience funding constraints, the Ministry of Health and Child Care, along with partners, are committed to minimizing disruptions. If you are concerned about your medication and other health services, consult your local health provider for guidance or get in touch with the ZNNP+ through the Kutabila Platform tollfree number: 08080441. This service is free and you do not require airtime in your phone to call.



How can I ensure that I do not run out of my ARVs?

Collect medication refills on time.
The Government of Zimbabwe and other partners are committed to ensuring that treatment is available for all PLHIV. Your healthcare providers will ensure that you get supplies for your ARVs though the length/amount may vary depending on availability of medicines at the facility.



Are there alternative sources of ARVs if my usual clinic runs out?

Yes. If your clinic faces shortages, you may be redirected to another facility with available stock. You can also reach out to the Zimbabwe National Network of People Living with HIV (ZNNP+) through the Kutabila Platform toll free number: 08080441 to receive further assistance. This service is free, and you do not require airtime in your phone!



What should I do if I hear rumors about ARV shortages?

Verify information with your healthcare provider, clinic, or ZNNP+ before acting on any rumors. Misinformation can cause unnecessary panic.



Where can I get more information and support?

For accurate and updated information, contact your local health facility under the Ministry of Health and Child Care (MOHCC), the Zimbabwe National Network of People Living with HIV (ZNNP+) at 08080441, or the National AIDS Council (NAC) for support and resources.

08080441

Don't hesitate to reach out, your health matters!
Call the Kutabila Platform for free for support and information.



From: Zimbabwe National Network of People Living with HIV (ZNNP+)

And: National Meaningful Involvement of People Living with HIV (MIPA) Forum Date:

April 16, 2025

Subject: Impact of USG Stop Work Orders on the Zimbabwe HIV Response and Recommendations for Addressing Service Delivery Gaps

On April 16, 2025, the National Meaningful Involvement of People Living with HIV (MIPA) Forum convened in Kadoma to discuss the significant challenges posed by the recent United States Government (USG) Stop Work Orders on the HIV response in Zimbabwe. This meeting brought together key stakeholders, including sector wide representatives of people living with HIV (PLHIV) and government, to assess the current landscape of HIV service delivery and to formulate actionable recommendations.

Key Findings:

1. **Service Delivery Disruptions:** The USG Stop Work Orders have led to disruptions in the provision of critical HIV services, including testing, treatment, and support for people living with HIV (PLHIV). This has resulted in increased vulnerability among PLHIV, particularly in marginalized communities.
2. **Increased Stigma and Discrimination:** The interruption of services has exacerbated stigma and discrimination against PLHIV, as many individuals are unable to access necessary healthcare and support systems or feel unable to access given the uncertainty of services. This has further marginalized already vulnerable populations.
3. **Diminished Community Monitoring and Engagement:** The involvement of PLHIV in decision-making processes has been compromised, limiting the effectiveness of responses tailored to the needs of affected communities.

Recommendations:

Considering these findings, we urge the Government of Zimbabwe, international partners, and civil society organizations to take immediate and coordinated action to address the service delivery gaps affecting PLHIV. Our recommendations include:

1. Urgent Dialogue with all HIV response stakeholders: Engage in constructive dialogue with critical stakeholders in the national HIV response to assess the impact of the Stop Work Orders and explore avenues for resuming critical HIV services without compromising compliance and accountability.
2. Resource Mobilization: Increase domestic resources to fill service delivery gaps and support innovative approaches to HIV prevention, treatment, and care.
3. Strengthening Local Capacity: Invest in strengthening local organizations and community-based initiatives to ensure continuity of care and support for PLHIV during this challenging period and beyond.
4. Advance Community-Led Solutions: Meaningful involvement of PLHIV in the design and implementation of HIV programs is required to ensure that services are responsive to the needs of the community.
5. Enhance Data Collection: Implement robust data collection mechanisms to monitor the impact of service disruptions on PLHIV and to inform evidence-based interventions.

We believe that by working collaboratively and prioritizing the needs of PLHIV, we can mitigate the adverse effects of the current situation and strengthen the overall HIV response in Zimbabwe.

We call upon all stakeholders to join us in this critical endeavor to ensure that no one is left behind in the fight against HIV.

For further information, please contact:

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****End of Communique****



Zimbabwe National Network of People living with HIV (ZNNP+)

Statement with regards to elements of PEPFAR funding

Harare: 28 January 2025

Harare, Zimbabwe – As ZNNP+ we recognize the anxiety surrounding the recent stop work orders affecting some of the health projects, particularly those supported by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). We acknowledge the fears and anxieties shared by communities about the potential consequences of these disruptions on health services critical to combating the HIV and AIDS epidemic.

The implementation of stop work orders has led to significant fears, including:

- **Reduced Access to Essential Services:** Many individuals rely on uninterrupted access to treatment and care. The disruption of programs raises concerns about potential health setbacks.
- **Increased Stigma and Discrimination:** The perception of dwindling support can discourage individuals from seeking help, exacerbating feelings of isolation and stigma.
- **Loss of Community Trust:** Uncertainty around funding can erode confidence in health services, leading to fears that progress made in combating HIV and AIDS will be undone.
- **Long-term Health Outcomes:** There is legitimate concern about how these interruptions may negatively impact long-term strategies to end the epidemic.

A Message of Reassurance

Through support we are receiving from our partners such as GNP+, NATF, among others, ZNNP+ wants to affirm that we remain open, actively representing the voices and needs of people living with HIV. Our commitment to advocacy remains unwavering. We will:

- **Continue Advocacy:** We will advocate to all levels of government to ensure that our communities receive the necessary support and that the rights of people living with HIV are protected during this time.
- **Maintain Communication:** We will keep our communities informed about any developments through our platforms. The Kutabila Platform will continue to be operational. PLHIV are urged to call at no cost, our tollfree number, 08080441 to report any disruptions in services or share any challenges they are experiencing.

Together, we can navigate these challenges and reaffirm our dedication to ending the HIV/AIDS epidemic.

About ZNNP+

ZNNP+ is Zimbabwe's umbrella network of people living with HIV. It is a community entity that advocates for the interests of PLHIV, to ensure they have access to quality care and treatment and are treated with dignity

For More Information

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Using (Econet lines only)_Toll Free Kutabila PLHIV and Communities Platform: 08080441

ACKNOWLEDGEMENTS

We wish to extend our sincere gratitude to our valued donors, partners, and stakeholders for their unwavering support and trust. Your confidence in ZNNP+ has been instrumental in turning our shared vision into reality. Together, we are making a meaningful impact in the communities we serve, and we deeply appreciate your commitment to our mission.

Thank you for being an essential part of our journey.



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